## P02000042351

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL.		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of	of Status		
Special Instructions to Filing Officer:				







600068301726

169/22/15--010/5--014 \*\*55.00



## COVER LETTER

TO: A	mendment Section vivision of Corporations				
SUBJEC	T: CARMEN INGLE & ASSOCIATES, I	NC pration)			
	•	<b>,</b>			
DOCUM	ENT NUMBER: P02000042351				
The enclo	sed Statement of Change of Registered Office/Ag	ent and fee are submitted for filing.			
Please ret	urn all correspondence concerning this matter to t	he following:			
	CARMEN INGLE	_			
	(Name of Contact	Person)			
	CARMEN INGLE & ASSOCIATES	INC			
	(Firm/Compa				
	12489 CITATION RD				
	(Address)				
	ODDING LINE EL 24640 4892				
	SPRING HILL, FL 34610-4823 (City/State and Z	p Code)			
For furthe	er information concerning this matter, please call:	•			
CADMEN	LINICIE	404.0008			
CARMEN	(Name of Contact Person)	t (813 ) 404-9098 (Area Code & Daytime Telephone Number)			
Englased	is a \$35.00 check made payable to the Departmen	it of State			
Eliciosed	is a \$55.00 check made payable to the Departmen	it of State.			
	Mailing Address;	Street Address: Amendment Section			
	Amendment Section				
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building			
	Tallahassee, FL 32314	2661 Executive Center Circle			
		Tallahassee FL 32301			

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 6 inge is submitted for a corporation organized ir to change its registered office or registered	d under the laws of the State of FLORIDA		
	the corporation: CARMEN INGLE & ASSOC			
2. The principal office address: 12489 CITATION RD, SPRING HILL, FL 34610-4823				
3. The mailing a	ddress (if different): 12489 CITATION RD,	SPRING HILL, FL 34610-4823		
4. Date of incorp	poration/qualification: 4/18/2002	Document number: P02000042351		
	d street address of the current registered agent tment of State:	t and registered office on file with the		
	CARMEN INGLE			
	19109 HARBOR COVE CT			
	TAMPA, FL 33558	31 8		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	CARMEN INGLE	f changed) and /or registered office		
	12489 CITATION RD			
	(P.O. Box NOT acceptable) SPRING HILL, FL 34610-4823			
	ess of its registered office and the street add be identical.	lress of the business office of its registered agent,		
Such change wa authorized by th	as authorized by resolution duly adopted by ne board, or the corporation has been notified	its board of directors or by an officer so ed in writing of the change.		
Urven (Signatu	are of an officer or director)	CARMEN INGLE (Printed or typed name and title)		
I hereby accept I further agree t of my duties, and document is bein corporation has	the appointment as registered agent and as to comply with the provisions of all statutes d I am familiar with and accept the obligat ng filed mefely to reflect a change in the re s been notified in writing of this change.	gree to act in this capacity. s relative to the proper and complete performance tion of my position as registered agent. Or, if this egistered office address, I hereby confirm that the		
arme		3/20/2006		
\-\ <b>0</b>	chalf of an entity:  Lug(e)  Typed or Printed Name)	(Date)		

\* \* \* FILING FEE: \$35.00 \* \* \*